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Substitute for form 1449/PTO			Complete if Known			
Substitute for for		Application Number	10/530,384			
INICODA	MATION DISCLOSURE	Filing Date				
	NATION DISCLOSURE	First Nameo inventor	FRANK NEUMANN			
STATE	MENT BY APPLICAN	Art Unit				
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**U. S. PATENT DOCUMENTS** Pages, Columns, Lines, Where Relevant Passages or Relevant **Publication Date** Name of Patentee or Examiner Cite Document Number MM-DD-YYYY Applicant of Cited Document Figures Appear Number-Kind Code<sup>2 (F known)</sup> US US-US-US-US-US-บร-US-US-US-US-US-US-US-US-US. US-US-US-

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